

Tel-Med—A Success Story

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Providing health information by telephone with tape-recorded messages has spread from a local medical society project to a nationwide information resource. More than 800,000 calls per month are received in 180 cities, accessing a library of more than 300 subjects.

TEL-MED—a program to make taped health information available by telephone—was begun by the San Bernardino County (California) Medical Society in March 1972.¹ Started as a local experiment to improve public access to accurate medical information, the concept has been expanded into a major resource available to more than 65,000,000 people through sponsoring agencies in 180 cities.

Tel-Med is now a nonprofit, tax exempt educational corporation which administers the program nationally. All tapes in every city must have the approval of the local county medical society. This insures conformance with local standards and assures acceptance. The multiple levels of review also assure that information is accurate, up-to-date and clearly presented.

The tape library now addresses more than 300 subjects in English, with 200 of those also available in idiomatic Spanish. The length of the recordings varies from three to six minutes. Members of the San Bernardino County Medical Society have written most of the scripts, but many have also come from physicians in other Tel-Med cities. The scripts are edited and revised by Tel-Med staff into simple language for comprehension at the level of an eighth grade education. A panel of physicians reviews the revisions for ac-

curacy and quality of presentation. The final script is professionally narrated and recorded on the type of tape cartridges used by the radio broadcasting industry.

People desiring access to information dial the local Tel-Med telephone number and request the tape by name or number. The local Tel-Med operator selects the proper cartridge from a bank of tapes and plugs it into a slot in a sophisticated playback device (see Figure 1). At the conclusion of the message, an electronic signal automatically disconnects the line and ejects the cartridge, which is loaded with the tape in a continuous loop so that it is immediately ready to play again.

In a recent nationwide survey,² practicing physicians indicated by a two-to-one margin that they felt "medicine has already done about all it can to reduce mortality and that henceforth attention should shift to prevention. . . ." When asked which single preventive program could promote health the most, and therefore should receive top government priority, 53 percent said public education.

Because Tel-Med programs meet these needs by emphasizing maintenance of health and prevention or early detection of disease, public response throughout the nation is consistently enthusiastic and supportive. As a bonus, the sponsoring agencies have reaped a harvest of good will and favorable publicity—a rarity in these

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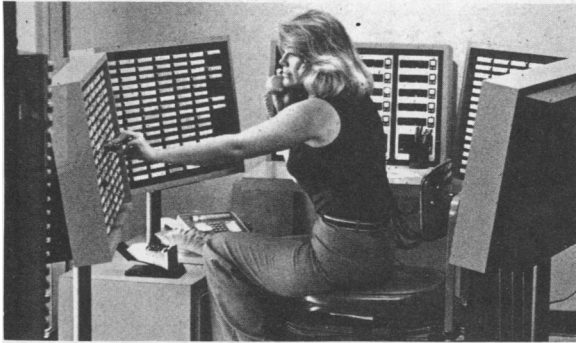


Figure 1.—A Tel-Med switchboard operator answers a request for one of the 300 English and 200 Spanish tapes in the Tel-Med library.

times when physicians, hospitals and medical organizations are often on the defensive. By properly informing the public, Tel-Med guides them to proper utilization of available facilities. The taped messages effectively supplement physician and staff counseling for patients and their families. An easily accessible link of communication between providers and consumers has resulted. Any suggestion of propaganda or commercialism is scrupulously avoided.

Because callers remain anonymous, they can request vital information on sensitive subjects such as venereal disease or birth control without fear. Accurate information is presented on drug abuse and locations where help is available. A frightened, insecure or unsophisticated listener can seek assistance with confidence and without embarrassment about his ignorance or the nature of his concern.

Tel-Med is definitely cost effective. A careful analysis has been conducted of the Tel-Med program in Pittsburgh (the study has not yet been published). From inception in June 1976 through February 1978, total expenditures were \$113,996. In this period there were more than 500,000 calls for Tel-Med tapes by about 125,000 consumers. This amounts to less than 23 cents per call. There is no less expensive means to provide specific requested health information.

A survey was also conducted of 522 Pittsburgh telephone subscribers. It showed that 41 percent had heard of the Tel-Med program and about 15 percent had used it. Those who had used the program reported 92 percent satisfaction with the information provided. They also reported positive changes in behavior and more appropriate physician referral for problems. Of course, the effectiveness of achieving the latter goals is dif-

TABLE 1.—*Most Requested Tapes*

1. Marijuana
2. Masturbation
3. Am I Really Pregnant?
4. Vasectomy
5. Gonorrhea
6. Tommy Gets His Tonsils Out
7. Syphilis
8. Venereal Disease
9. Breast Cancer
10. LSD
11. Teen Years—The Age of Rebellion
12. I'm Just Tired, Doctor
13. Vaginitis
14. The Rhythm Method
15. You May Have Diabetes And Not Know It

ficult to assess quantitatively; however, it has been the consistent experience of sponsoring agencies from feedback in their communities that tapes do successfully transmit desired information.

While the range of subjects covered is very broad, the subjects which were originally identified as being in most demand have consistently ranked among those most requested nationwide. These subjects reflect major social concerns—venereal disease, birth control and drug abuse (Table 1).

The pilot program was funded by grants of \$24,500 from Regional Medical Programs Area VI, \$10,500 from the California Medical Education and Research Foundation (CMERF) and \$11,000 from the San Bernardino County Medical Society. With termination of the Regional Medical Programs in 1974, a one-year grant of \$150,000 was provided by the Department of Health, Education, and Welfare to permit transition to a self-sustaining basis capable of propagation across the country. An additional grant of \$45,000 from the American Medical Association Education and Research Foundation made it possible to develop a companion program, Tel-Hospital, that provides specific information for hospital patients about tests and procedures. This latter program is now in operation in two cities.

Tel-Med is now financially solvent and self-supporting through the modest charges made for the library and its maintenance in licensed agencies throughout the nation.

Tel-Med, Inc. is paid \$20 per tape to develop the initial library. The total library of tapes is then maintained at a cost of \$30 per month regardless of the number of tapes. Newly revised,

TEL-MED

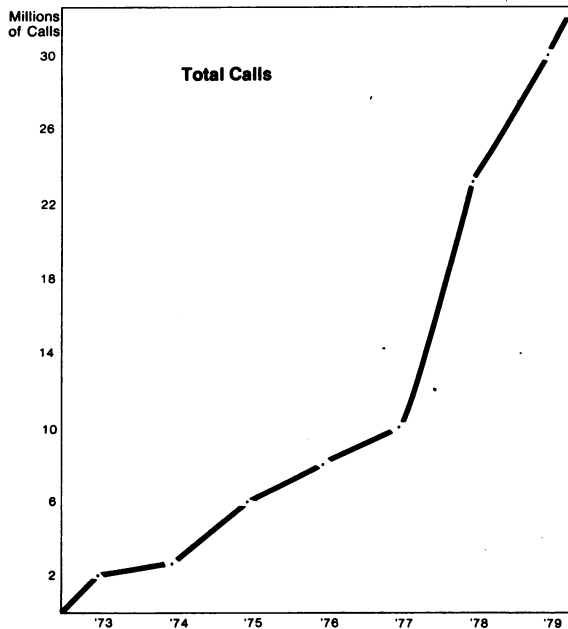


Figure 2.—Graph showing total number of calls for Tel-Med health information tape-recorded messages nationwide since the program's inception in 1972.

updated tapes are provided at a cost of \$9.75.

Growth has been steady since the program first spread to San Diego and then across the country. The Indiana State Medical Association established a WATS line service to provide access to everyone in the state. In February 1978, Tel-Med was made available to 85 percent of the population of New Jersey through the simultaneous opening of 17 centers in that state.

A noteworthy by-product in this time of strained relations between the medical and legal professions has been the development of the companion Tel-Law program by the San Bernardino County Bar Association. They share the use and expense of the San Bernardino Tel-Med switchboard, and attorneys' wives alternate with those of physicians in staffing it.

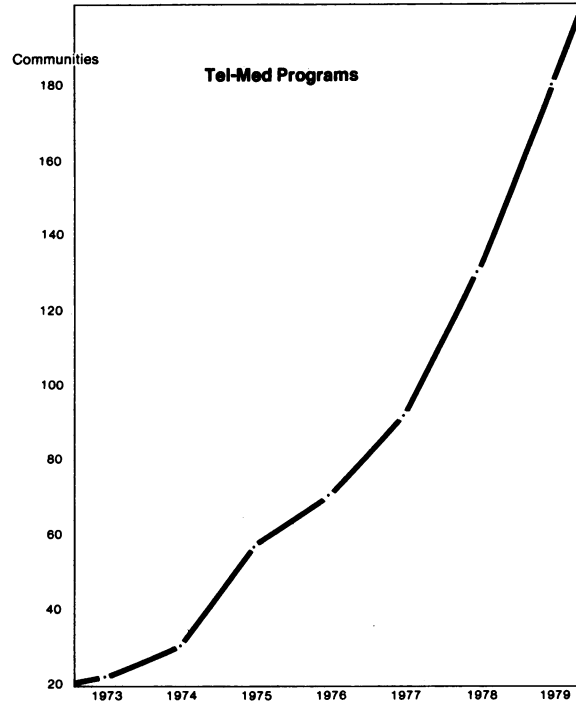


Figure 3.—Graph showing number of communities that have established Tel-Med services since the initial project was started by the San Bernardino County Medical Society in 1972.

The progress of Tel-Med validates the concept and the effort it has taken to implement it. Nationwide requests exceed 800,000 a month, with a total of 30 million since April 1972 (Figure 2). It seems clear that Tel-Med is in a phase of geometric expansion (Figure 3) and, obviously, a saturation point will be reached eventually. It does not seem unrealistic, however, to hope that within the next six years Tel-Med tapes will be available toll free to most Americans.

REFERENCES

1. Harer WB Jr: Tel-Med—A public medical information service by phone (In the Forefront). *Calif Med* 117:68-70, Aug 1972
2. Physicians favor shift to prevention—especially through education. *Med World News* 62, May 1978